

Application Data Sheet

Application Information

Application number::

Filing Date:: 12/03/03

Application Type:: Regular

Subject Matter:: Utility

Suggested classification:: 430/311

Suggested Group Art Unit:: 1752

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: A VLSI-BASED SYSTEM FOR DURABLE HIGH-DENSITY
INFORMATION STORAGE

Attorney Docket Number:: 018236-000720US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure:: 2

Total Drawing Sheets:: 8

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: India
Status:: Full Capacity
Given Name:: Pawan
Family Name:: Sinha
City of Residence:: Cambridge
State or Province of Residence:: MA
Country of Residence:: US
Street of Mailing Address:: 100 Memorial Drive
Postal Address Line Two:: Apt. 8-4C
City of Mailing Address:: Cambridge
State or Province of mailing address:: MA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 02142

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Pamela
Middle Name:: R.
Family Name:: Lipson
City of Residence:: Cambridge
State or Province of Residence:: MA
Country of Residence:: US
Street of Mailing Address:: 217 Thorndike Street
Postal Address Line Two:: Apt. 109
City of Mailing Address:: Cambridge
State or Province of mailing address:: MA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 02141

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Keith
Middle Name::	R.
Family Name::	Kluender
City of Residence::	Madison
State or Province of Residence::	WI
Country of Residence::	US
Street of Mailing Address::	5718 Tolman Ter.
City of Mailing Address::	Madison
State or Province of mailing address::	WI
Country of mailing address::	US
Postal or Zip Code of mailing address::	53711

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Designation::	Representative Number::	Representative Name::
Primary	26,578	Lesley S. Craig
Associate	43,616	Thomas D. Franklin

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application 09/662,300	Continuation of An Appn claiming benefit under 35 USC 119(e) of	09/662,300 60/154,401	09/15/00 09/17/99

Foreign Priority Information

Country::

Application number::

Filing Date::

Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::